



## **Authorization to Place Personal and/or Confidential Information on a Portable Computing Device**

**Department Name** \_\_\_\_\_

This Authorization to place (download or input) personal and/or confidential information on a portable computing device (portable computer, portable device, or portable storage media) must be completed for each initial placement (download or input) of the information to each device and be signed by the user of the portable computing device and designated department management in accordance with Board of Supervisors Policy 6.110 – Protection of Information on Portable Computing Devices and Board of Supervisors Policy 3.040 – General Records Retention and Protection of Records Containing Personal and Confidential Information (Note – Policy 3.040 is applicable only for the purpose of providing the definitions of “personal information” and “confidential information”, as referenced in Policy 6.110). However, if the personal and/or confidential information is downloaded from a particular application system to a particular portable computing device, then this Authorization must be completed only for the initial placement (download) of the information on such device, regardless of how often the information is downloaded to such device.

For each initial placement of personal and/or confidential information on each portable computing device, the following steps are required:

1. Provide a description of the portable computing device as indicated below
2. Specify the information to be placed on such device and related information as indicated below
3. Establish an exact copy of the information, preferably on a department computer, to allow for 100% accurate re-creation and audit of the information
4. Encrypt the information during the entire time that it resides on the portable computing device
5. Maintain physical security over the portable computing device during the entire time that the information resides on the device (e.g., the user must maintain physical possession of the device or keep the device secure when unattended)
6. User signature
7. Department management signature

### **Portable Computing Device Description:**

Device type (e.g., laptop, PDA, USB drive, etc): \_\_\_\_\_

Device serial number: \_\_\_\_\_

Property number (if County property): \_\_\_\_\_

Name of encryption software installed: \_\_\_\_\_

Operating system: \_\_\_\_\_

## Information Being Placed on the Portable Computing Device:

Purpose of placement: \_\_\_\_\_

Application system name (if applicable): \_\_\_\_\_

Personal and/or confidential information fields: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## User Agreement and Acknowledgement:

I have read and agree to fully comply with Board of Supervisors Policy 6.110 – Protection of Information on Portable Computing Devices and Board of Supervisors Policy 3.040 – General Records Retention and Protection of Records Containing Personal and Confidential Information (Note – Policy 3.040 is applicable only for the purpose of providing the definitions of “personal information” and “confidential information”, as referenced in Policy 6.110). I agree to fully comply with all County requirements and directions concerning the above portable computing device and personal and/or confidential information.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

## Department Approval:

Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_